Pregnancy Maintenance Initiative (PMI) 2017-2018

Date Generated: 03/17/2017 Wyandotte Pregnancy Clinic Period: 07/01/2017 - 06/30/2018 Filter(s): Wyandotte Pregnancy Clinic;

Grouping A - Administration and Management

Goal: A.1 - Capacity building and accountability

Start Date:

End Date:

Attach proof of Non-Profit Status (501(c)(3))

Did you attach your Non-Profit Status (501(c)(3))?: Yes

List your PMI Program staff names, positions and email addresses (Note the staff member who is the Primary Point of

Contact): Mary Gliserman Executive Director mgliserman@wpcnetwork.org Primary contact

Leslie Kuehner Counselor/Client Services Director clientservice@wpcnetwork.org

Amanda Rodriguez Resource Manager resource@wpcnetwork.org

Geraldine Jones Counselor/Volunteer Coordinator gjones@wpcnetwork.org

Christie Vandeputte Accounts Payable cvandeputte@wpcnetwork.org

Cindy Smith Nurse Sonographer lacinda3289@gmail.com

Kathryn Brown Counselor/Social media kbrown@wpcnetwork.org

Sylvia Eker Data Entry sylvia@wpcnetwork.org>

Attach an Agency Organizational Chart

Did you attach an Agency Organizational Chart that clearly identifies where the PMI section falls within the agency and the staff associated?: Yes

Strategy: A.1.1 - Build internal capacity

Start Date:

End Date:

Summarize your staff management plan to include verification of staff licensure, documentation of mandated training, performance appraisal process and professional development plan: Staff Management Plan:

New Staff Orientation:

Study literature and client files to understand demographic and life situations of clients

Complete self-paced training requirements which include counseling, documentation and listening skills.

Watch videos used to educate clients on prenatal, parenting and life skills

Meet with Resource Manager (licensed social worker/case manager) to better understand that role.

Observe and shadow phone calls and client visits until ready to become a lay counselor

Two weeks working and being observed/or until ready to begin lay counseling alone.

Performance Appraisal

End of first week conduct verbal review

End of first month conduct verbal review

End of 90 days complete a written review

End of first 6 months complete written review

End of first year complete a written review

Staff is then reviewed when necessary or on an annual basis by the executive director

Professional Development

Staff development occurs through:

Ongoing self-paced training with in-house materials

Special topics training during weekly team meetings

Attendance of community workshops offered by partnering organizations to enhance knowledge and strengthen the network Attendance of conferences pertaining to pregnancy maintenance

A current copy of the license is kept on file for each licensed staff member.

	Requirement: A.1.1.1 - Attend annual meeting/training provided by KDHE
	Start Date:
l	End Date:
	Requirement: A.1.1.2 - Provide orientation and training of new staff
	Start Date:
	End Date:
	Describe your process for orienting and training staff new to the PMI program.: To orient new staff, WPC require them to: Study relevant literature and client files to understand demographic and life situations of clients Complete self-paced training requirements which include counseling, documentation and listening skills. Watch videos used to educate clients on prenatal, parenting and life skills Meet with Resource Manager (licensed social worker/case manager) to better understand how that role interfaces with counselors Review with RM the PMI programand how it works Observe and shadow phone calls and client visits until ready to become a lay counselor Have two weeks working and being observed/or until ready to begin lay counseling alone
ŀ	Requirement: A.1.1.3 - Develop a method for recruiting selecting, and training staff
	Start Date:
ŀ	End Date:
	d Date:
Ī	Requirement: A.1.2.1 - Submit Financial Status Report and Client Demographic Summary quarterly
ŀ	Start Date:
ŀ	End Date:
ŀ	Requirement: A.1.2.2 - Submit Quarterly Progress Report
ŀ	Start Date:
ŀ	End Date:
	Requirement: A.1.2.3 - Participate in site visits and technical assistance calls as requested by the State
ŀ	Start Date:
	End Date:
	A.2 - Program evaluation
	Date:
-	······
•	eate:

St	rategy: A.2.1 - Develop a program evaluation process to ensure services are provided as proposed			
St	art Date:			
Er	nd Date:			
an wo etc the	numarize your program evaluation methods to include how you will expand services to meet community needs.: Our nual goal is to serve 100 PMI clients. We use the forms provided in the PMI Manual by KDHE to collect data. We continually ork to expand our outreach to the community. We conduct our marketing via Facebook, two websites, Yellow Pages, churches, e. Mid-year in 2014 a local Kansas City, Ks abortion clinic closed as did a local Kansas City, Ks pregnancy clinic. We are now e only pregnancy clinic located in Wyandotte County. We aggressively marketed to the community when these closings curred. As a result, we have experienced significant growth and our client workloads have double and tripled over previous ar periods.			
are we tra	We use evidence-based methods to evaluate our program. We are using DAISEY and our PMI client database to track who are reaching demographically, and quantifying client activities and results. For example, using the forms from the PMI may be track that the client has established a doctor relationship for her pregnancy and is keeping appointments. Additionally, track the steps clients take to complete goals. Our case manager uses and will continue to use her expertise, combined with the edback and input from other service providers to evaluate effectiveness of services.			
in	Our case manager will be primarily responsible for ensuring that the right services are being provided. We will also solicit client input, as well as input from other service providers. Client satisfaction surveys will be used in this process. We will also get input from the advisory board.			
	ar case manager is primarily responsible for collecting client data using the forms provided in the PMI manual. Our case anager will also be entering all the relevant and required data into DAISEY.			
[Requirement: A.2.1.1 - Develop and use a client satisfaction survey			
	Start Date:			
	End Date:			
	Attach a Client Satisfaction Survey in the attachment section above			
	Did you attach a Client Satisfaction Survey?: Yes			
	Requirement: A.2.1.2 - Develop and maintain program policies and procedures that are based on program standards and guidelines.			
	Start Date:			
	End Date:			
St	rategy: A.2.2 - Create and maintain a functioning advisory group.			
St	art Date:			
Er	nd Date:			
Ex PN	escribe your PMI Advisory Group membership and frequency of meetings.: PMI Resource Manager Amanda Rodriguez tec Director Mary Gliserman MI Client Ashley Gilbert MI Client Shaquita McDonald			
	e meet quarterly. Our first meeting was in November (as reported in detail in our last quarterly report) and our second meeting scheduled for the last week in March.			
	Requirement: A.2.2.1 - Composition of the advisory group will reflect the community (race, ethnicity, SES)			
	Start Date:			
	End Date:			
	Requirement: A.2.2.2 - Regular meetings will be held and minutes of the meeting kept			
	Start Date:			
	End Date:			

Goal: B.1 - Measure program impact
Start Date:
End Date:
Describe your program goals, objectives and outcome measures.: Our annual goal is to serve 100 PMI clients. Many objectives will tie directly to achieving documented client goals. Outcomes will be measured by use of the completed PMI client forms, satisfaction surveys and DAISEY.
Strategy: B.1.1 - Develop an evaluation tool to measure program effectiveness
Start Date:
End Date:
How will you measure effectiveness of services, interventions and referral networks?: Our case manager tracks and follows through with clients to insure they are completing goals and meeting with the referrals we have given them. Clients are asked if they were helped by the referral organizations and our case manager regularly follows up with the referral organizations.
How will you ensure services provided are those needed by clients?: Services received are compared to client goals to make sure identified needs are met. Clients are asked by our case manager if the services provided by the referral organizations were beneficial. Our case manager also ensures that clients are receiving needed services by regularly checking in with them, either by phone or in person.
Describe your plan for collecting and entering client information into DAISEY (KDHE approved data system), including who will collect the information, how it will be collected and when it will be entered. If you also enter client data in another system, include the name of the system (Insight, Nightingale Notes, etc.): Our PMI case manager will be responsible for collecting data via PMI client forms and then entering the data into DAISEY at least, not limited to, every Friday. Other client data is collected by counselors and other staff and entered into our customized Access Client Data Base by our data entry clerk every day, Monday-Friday.
Attach a current DAISEY Terms of Use Agreement signed by your agency for FY 2018 (electronic or handwritten signatures are acceptable).
Did you attach a signed DAISEY Terms of Use Agreement for FY 2018?: Yes
Requirement: B.1.1.1 - Gather and use data to plan and evaluate interventions and referral networks
Start Date:
End Date:
Requirement: B.1.1.2 - Gather and use data to assess program impact
Start Date:
End Date:
Grouping D - Interventions to Improve Public Health
Goal: D.1 - Provide services to enable pregnant women to carry their pregnancies to term
Start Date:
End Date:
Describe services to be provided to pregnant women that will enable them to carry their pregnancies to term. Note the strategies and curriculums used and note whether or not they are evidence-based.: We provide limited sonograms, prenatal vitamins, and education in the actions/choices they need to make and follow during their pregnancy. We provide these services through our program, Women of Worth, which allows counselors to meet with clients on a regular basis, all at no charge to our clients. Curricula in our Women of Worth program are evidence-based. By attending and participating in these sessions, clients earn points to use on baby items, personal hygiene items, maternity clothing and other personal items. Besides the above benefits, clients also receive the personalized service of our case manager, who regularly checks in with them.
Estimate the total number of clients to be served during the grant period.: 100
Estimate the number of new enrollees to be served during the grant period: 80
Select all counties to be served below
County: Johnson; Leavenworth; Wyandotte

	Stı	rategy: D.1.1 - Assure that no individuals unable to pay will be denied pregnancy maintenance services
	Sta	art Date:
	En	nd Date:
		Requirement: D.1.1.1 - Have on file written protocols that clearly outline how the local pregnancy maintenance services are to be implemented
		Start Date:
		End Date:
	Stı	rategy: D.1.2 - Adoption services and pregnancy education will be part of the program
	Sta	art Date:
	En	nd Date:
	intermed pre- tra:	escribe the adoption services and pregnancy education to be provided as part of the program.: When a client is erested in adoption, we have a referral adoption agency representative meet with our client at our location for their first eeting. We then coordinate with that agency on how to structure our program to fit the birth mother's needs to ensure a healthy egnancy. We also use literature that helps the client consider and possibly choose the adoption option. Our staff has received ining from an adoption expert so that we can more readily help clients who are considering this option. Therefore the confirmation of pregnancy, our program consists of the sonogram, visit with case manager, then one-on-one classes ing videos, literature, questionnaires, and homework about the topic for that meeting. The program consists of education on the organization of the pregnancy and any needs that may come up during the meeting. We also cover the fetal development and labor delivery process.
	We	e also have incorporated March of Dimes "Becoming a mom" program into our educational sessions.
		Requirement: D.1.2.1 - Case managers to attend adoption training class
		Start Date:
		End Date:
		Requirement: D.1.2.2 - Provide plan for providing adoption as an option
		Start Date:
		End Date:
		Requirement: D.1.2.3 - Provide adequate resources and referrals
		Start Date:
		End Date:
Go	al:	D.2 - The program shall not perform, promote or refer for education in favor of abortion.
Sta	rt]	Date:
En	d D	Date:
Ca	n y	ou provide assurances that the program will not perform, promote or refer for education in favor of abortion?: Yes
	Stı	rategy: D.2.1 - Provide assurances
	Sta	art Date:
	En	nd Date:
Gı	ou	ping E - Communications and Promotions
Go	al:	E.1 - Increase public awareness of services and generate buy in
		Date:

Start Date:
End Date:
How will you promote your Pregnancy Maintenance Initiative (PMI) services to the community?: We conduct our marketing via Facebook, a client web site, a donor web site, Yellow Pages, brochures, posters, mailings, our bi-monthly enewsletter and public speaking engagements throughout the year. We also network with schools, churches and other community organizations through attending meetings and representing WPC at fairs and other community events. We advise our community partners of our PMI services. We also added a direction sign on our cross street to help bring more clients into our clinic.
Strategy: E.1.2 - Planned outreach activities
Start Date:
End Date:
What are your planned outreach activities?: We will continue to reach out to churches, schools and other community organizations. We had a very successful Open House in January of this year with more than 100 in attendance and plan to have another in the coming months. We regularly attend events at area churches to promote our services. We also have a monthly outreach called Momology 101 that draws clients for education and connection.
Strategy: E.1.3 - Target and recruit clients
Start Date:
End Date:
Grouping F - Partnerships
Goal: F.1 - Collaborative partnerships with community providers
start Date:
End Date:
Strategy: F.1.1 - Build and maintain local partnerships
Start Date:
End Date:
Requirement: F.1.1.1 - Develop and maintain collaborative partnerships with community providers of related services
Start Date:
End Date:
Identify your key partners including community-based health, social service providers, and Maternal and Child Health (MCH). Describe how you collaborate to ensure needed services are provided.: Key Community partners: Wyandotte County Health Department/WIC Mercy and Truth - provides general medical care, prenatal care New Birth Company - provides prenatal and delivery services Project Eagle - provides education for families (and programs in Spanish) for which we award points that can be spent on WPC baby items SafeKids of Metro KC and SafeKids of Johnson County - provide safe sleep education and materials and car seat resources Kansas State Troopers - Car seat safety instruction, installations and providing of new car seats to our clients Archdioceses of Kansas City and Kansas - provides instruction on learning and development, infants through adulthood Connections – provides services needed by clients outside of pregnancy needs that we provide American Lung Association - provides smoking cessation classes and support on-site for our clients Zoe's House Adoptions - adoption services and other support services Mother's Refuge - maternity housing for pregnant women up to age 21 Doctors, including our medical director, Dr. Branden Mitchell – referrals for pregnancy care. Requirement: F.1.1.2 - Develop referral sources for related services Start Date:

Start Date:

End Date:

When referring for services outside the program, what are the processes for initiating referrals and for follow-up after referral to ensure clients engage in the services?: Our licensed case manager meets with the client to identify needed referrals and places them with agencies best suited to their needs. Some of our referrals are passive referrals because we hear nothing back from the referred agency. Many of our referrals are active referrals with ongoing contacts by phone calls, emails and possible visits with the referred agency. Our case manager meets with our clients to assess whether the referrals were beneficial to them and also regularly networks with agency reps to build relationships and connections.